

Death rates for accidental injuries are higher for persons 75 and older than for all other age groups. At 166.7 deaths per 100,000, the rate for people 75 and older is about four times the rate of all Americans (47.9 per 100,000) and almost three times higher than the rate for the next highest group (63 per 100,000 for people 15 to 24 years).

Older Americans are harmed by fires, falls, and motor vehicle accidents, among other sources of injury. Accidents in 1977 accounted for almost 43 million days of bed disability among the elderly. While the elderly are quite knowledgeable about the risks of accidents, they are also vulnerable. We need community programs to add environmental safety to the innate caution of the elderly. Theoretically, all such injuries could be prevented; none are inevitable.

What we should *not* do is rest on our longevity laurels. We can—through education—cut the accident rate even as we emphasize the importance of nutrition, good preventive care, and exercise. The potential gain is clear, for us as individuals and for society. Both science and statistics point to still unconquered frontiers. There is a growing, willing, and receptive audience of older Americans who are ready to learn all that they can about making their health last a lifetime.

Margaret M. Heckler
Secretary of Health and Human Services

See the poster theme of Older Americans Month on cover 3.

**Epidemiology and Health Policy—
United States and Israel Share
Experiences and Perspectives**

In 1980, an agreement was developed and signed by the United States and Israel for the promotion of cooperative activities in health between the two countries. One activity planned under the agreement was meetings to be attended by scientists from both countries to discuss topics of mutual interest. The first such symposium was held in Tel-Hashomer, Israel, in March 1981, on the subject of "Regionalization of Health Services" (1). Participants at the second binational symposium, held October 17–19, 1983, at the National Institutes of Health,

Bethesda, Md., discussed the "Interrelationships of Epidemiology and Health Policy." The interrelationships of epidemiology—its limitations and contributions in the formulation of health policy—were explored from the perspective of the rich and varied experiences of health professionals, researchers, and decision-makers in the United States and Israel.

Following an initial plenary session, the conference participants divided into three workshops. The first workshop was entitled "The Role of Epidemiology and Preventive Initiatives"; the second workshop, "The Role of Epidemiology and Assessment of Need, Program Development, Resource Allocation"; and the third, "The Role of Epidemiology and Regulatory Programs." The individual workshop members met in three one-half-day sessions and discussed papers that were introduced by designated speakers. These presentations were followed by open discussions. At the final plenary session, the chairpersons of the three workshops reported on the presentations and discussions at their individual sessions.

The papers given at the workshops and a summary of the final discussions will be presented in three consecutive issues of *Public Health Reports*, beginning with papers from the first workshop, which are published in this issue. Presentations from the third workshop will appear in the July-August issue, and the presentations at the second workshop and summary discussions will be published in the September-October 1984 issue. Publication of those papers and the summary discussions will permit a much larger audience to benefit from this stimulating symposium. I believe this larger audience will find revealed in these reports, as did the participants, more evidence of the utility of epidemiologic data in formulating health policy.

On behalf of myself and all the American members of the organizing committee for this symposium, I wish to thank all the participants, and especially our Israeli guests, for their participation.

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Reference

1. Slater, P.E., and Davies, A. M., editors: Binational U.S.–Israel Symposium on the Regionalization of Health Services. *Israel J Med Sci* 18: 321–432 (1982)